



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

RESPIRATORY THERAPY SERVICES

Effective Date: March 28, 2003

Policy #: PH-08

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- I. PURPOSE:** Procedure for provision of Respiratory Therapy Services.
- II. POLICY:** Respiratory Therapy Services are not provided by Montana State Hospital. If a patient has a need for Respiratory Therapy Services, an outside consultation form will be completed and arrangements will be made for the patient to receive this service from an outside provider.
- III. DEFINITIONS:**

Respiratory Care Services: Delivery of care to provide ventilator support and associated services for individuals.
- IV. RESPONSIBILITIES:** Medical Clinic Physicians are responsible for referring patients for respiratory therapy services.
- V. PROCEDURE:** Procedure for referring patients for respiratory therapy services is outlined in the Consultation Services policy.
- VI. REFERENCES:** None
- VII. COLLABORATED WITH:** Medical Clinic Physicians
- VIII. RESCISSIONS:** #PH-08, *Respiratory Therapy Services* dated February 14, 2000
- IX. DISTRIBUTION:** All hospital policy manuals.
- X. REVIEW AND REISSUE DATE:** March 2006
- XI. FOLLOW-UP RESPONSIBILITY:** Medical Director
- XII. ATTACHMENTS:** None

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Ed Amberg
Hospital Administrator

Date

_____/____/____
Thomas Gray, MD
Medical Director

Date